

**Montana Medicaid - Fee Schedule
EPSDT - Respiratory Therapy
July 1, 2006**

Definitions:

Modifier – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

For example:

26 = professional component

TC = technical component

Description – Procedure code short description. You must refer to the appropriate official CPT-4, HCPCS or CDT-5 coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable. Fees for drugs, radiopharmaceuticals, blood products, immune globins, vaccines, and toxoids are reviewed and updated quarterly -- effective dates that are greater than three months old indicate that there has been no fee change since that date.

Method – Source of fee determination

Fee Sched: Medicaid fee; not determined using RBRVS payment schedule

Medicare: Medicare-prevailing fee.

By Report (BR): Equals 46% of billed charges

Anes Value: Number of anesthesia base value units. This is added to the 15 min. time increment units and multiplied by the anesthesia conversion factor of \$26.25.

RBRVS: Based on Medicare Relative Value Units (RVU's) x Montana Medicaid conversion factor x policy adjuster. Conversion factor for fiscal year 2007 is \$32.81.

***If a valid, current code is not present, that code may be a non-covered service**

Fees The facility rate is paid to physicians/practitioners providing services in the following sites: hospitals, emergency rooms, ambulatory surgery centers, IHS provider based and IHS 638 free standing facilities, skilled nursing and nursing facilities, hospice, ambulance, inpatient psychiatric and partial psychiatric hospitals, psychiatric residential treatment centers, comprehensive inpatient rehab facilities, and military treatment facilities. All other sites of service receive the office rate. Procedures not normally done in the office are shown with the same facility rate, while those done in both locations have different rates. Bundled services, which are covered but paid as part of a related service, are shown with an RBRVS method and a fee of \$0.00. Policy adjustments are applied to certain codes to increase or decrease reimbursement for the service.

Global Days – Global surgery indicator. Global surgery periods are pre- and post-operative time frames assigned to surgical procedures.

000: Same day as procedure

010: Same day and ten days following procedure

090: One day prior to and ninety days following procedure

MMM: In maternity cases, the global period is per the CPT-4 code description

ZZZ: Add-on code, global period does not apply. An add-on code must be billed with its associated primary code

Space: Global concept does not apply to this code

PA – Prior Authorization

Y: Prior authorization is required

Space - this indicator does not apply to this code

Indicators

Mult - Multiple surgery guidelines do apply

Bilat - Bilateral. The procedure can be done bilaterally

Assist - Assistant. An assistant is allowed for this procedure

Co-Surg - Co-Surgery. A co-surgeon is allowed for this procedure

Team - A team of surgeons is allowed for this procedure

Related - The procedure code listed is separately billable

Y - indicator is applicable to this code

Space - this indicator does not apply to this code

Policy Adjust - M = Maternity, P = Mental Health, D = Profess. Differential

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Proc	Mod	Description	Effective	Method	Fees		Global Days	PA	Mult	Bilat	Indicators			Policy Adjust
					Office	Facility					Assist	CoSurg	Team	
G0238	EP	OTH RESP PROC, INDIV	7/1/2006	RBRVS	\$14.17	\$14.17								
G0239	EP	OTH RESP PROC, GROUP	7/1/2006	RBRVS	\$9.74	\$9.74								
31502	EP	CHANGE OF WINDPIPE AIRWAY	7/1/2006	RBRVS	\$31.40	\$30.58	000		Y					
31720	EP	CLEARANCE OF AIRWAYS	7/1/2006	RBRVS	\$46.00	\$46.00	000		Y					
31725	EP	CLEARANCE OF AIRWAYS	7/1/2006	RBRVS	\$86.45	\$84.52	000		Y					
36600	EP	WITHDRAWAL OF ARTERIAL BLOOD	7/1/2006	RBRVS	\$24.67	\$13.58			Y					
82800		BLOOD PH	1/1/2005	MEDICARE	\$19.72	\$0.00								
82803		BLOOD GASES: PH, PO2 & PCO2	1/1/2005	MEDICARE	\$45.07	\$0.00								
92950		HEART/LUNG RESUSCITATION CPR	7/1/2006	RBRVS	\$249.22	\$159.52	000							
94010	EP	BREATHING CAPACITY TEST	7/1/2006	RBRVS	\$25.03	\$25.03								
94060	EP	EVALUATION OF WHEEZING	7/1/2006	RBRVS	\$41.87	\$41.87								
94070	EP	EVALUATION OF WHEEZING	7/1/2006	RBRVS	\$46.26	\$46.26								
94150	EP	VITAL CAPACITY TEST	7/1/2003	RBRVS	\$0.00	\$0.00								
94200	EP	LUNG FUNCTION TEST (MBC/MVV)	7/1/2006	RBRVS	\$16.67	\$16.67								
94240	EP	RESIDUAL LUNG CAPACITY	7/1/2006	RBRVS	\$28.58	\$28.58								
94250	EP	EXPIRED GAS COLLECTION	7/1/2006	RBRVS	\$21.92	\$21.92								
94260	EP	THORACIC GAS VOLUME	7/1/2006	RBRVS	\$21.82	\$21.82								
94350	EP	LUNG NITROGEN WASHOUT CURVE	7/1/2006	RBRVS	\$31.07	\$31.07								
94360	EP	MEASURE AIRFLOW RESISTANCE	7/1/2006	RBRVS	\$29.99	\$29.99								
94370	EP	BREATH AIRWAY CLOSING VOLUME	7/1/2006	RBRVS	\$29.36	\$29.36								
94375	EP	RESPIRATORY FLOW VOLUME LOOP	7/1/2006	RBRVS	\$27.69	\$27.69								
94400	EP	CO2 BREATHING RESPONSE CURVE	7/1/2006	RBRVS	\$39.04	\$39.04								
94450	EP	HYPOXIA RESPONSE CURVE	7/1/2006	RBRVS	\$37.86	\$37.86								
94620	EP	PULMONARY STRESS TEST/SIMPLE	7/1/2006	RBRVS	\$94.10	\$94.10								
94640	EP	AIRWAY INHALATION TREATMENT	7/1/2006	RBRVS	\$8.89	\$8.89								
94642	EP	AEROSOL INHALATION TREATMENT	7/1/2003	BY REPORT	\$0.00	\$0.00								
94656	EP	INITIAL VENTILATOR MGMT	7/1/2006	RBRVS	\$73.92	\$50.66								
94657	EP	CONTINUED VENTILATOR MGMT	7/1/2006	RBRVS	\$55.55	\$35.34								
94660	EP	POS AIRWAY PRESSURE, CPAP	7/1/2006	RBRVS	\$44.13	\$32.48								
94662	EP	NEG PRESS VENTILATION, CNP	7/1/2006	RBRVS	\$32.19	\$32.19								
94664	EP	AEROSOL OR VAPOR INHALATIONS	7/1/2006	RBRVS	\$9.78	\$9.78								
94667	EP	CHEST WALL MANIPULATION	7/1/2006	RBRVS	\$15.88	\$15.88								
94668	EP	CHEST WALL MANIPULATION	7/1/2006	RBRVS	\$13.06	\$13.06								
94680	EP	EXHALED AIR ANALYSIS, O2	7/1/2006	RBRVS	\$62.40	\$62.40								
94681	EP	EXHALED AIR ANALYSIS, O2/CO2	7/1/2006	RBRVS	\$80.48	\$80.48								
94690	EP	EXHALED AIR ANALYSIS	7/1/2006	RBRVS	\$59.16	\$59.16								
94720	EP	MONOXIDE DIFFUSING CAPACITY	7/1/2006	RBRVS	\$38.29	\$38.29								
94725	EP	MEMBRANE DIFFUSION CAPACITY	7/1/2006	RBRVS	\$93.25	\$93.25								
94750	EP	PULMONARY COMPLIANCE STUDY	7/1/2006	RBRVS	\$46.13	\$46.13								
94760	EP	MEASURE BLOOD OXYGEN LEVEL	7/1/2003	RBRVS	\$0.00	\$0.00								
94761	EP	MEASURE BLOOD OXYGEN LEVEL	7/1/2003	RBRVS	\$0.00	\$0.00								
94762	EP	MEASURE BLOOD OXYGEN LEVEL	7/1/2006	RBRVS	\$15.98	\$15.98								
94770	EP	EXHALED CARBON DIOXIDE TEST	7/1/2006	RBRVS	\$28.05	\$28.05								
94772	EP	BREATH RECORDING, INFANT	7/1/2003	BY REPORT	\$0.00	\$0.00								